



Exhibitor Registration Form

- Exhibit Location:** Central Carolina Occupational Safety & Health School
NCSU—McKimmon Center, 1101 Gorman St., Raleigh, NC
- Exhibit Date:** Thursday, March 9, 2006
- Exhibit Hours:** 7:30 AM—6:00 PM (Vendor reception and game night 4:45 PM—6:00 PM)
- Setup Hours:** Wednesday, March 8, 2006—5:30 PM—7:30 PM and on March 9th—6:00 AM—7:00 AM (must be set up by 7:30 AM)
- Exhibitor Fee:** \$300 (includes 1 table, 1 electrical outlet, complimentary meal, break food in room, free access to sessions, and electronic list of attendees.) Door prizes are encouraged.

Company/Organization	_____
Address	_____
City	_____
State	_____
ZipCode	_____
Contact Person:	_____
E-mail	_____
Telephone	_____
Fax	_____
Will you be providing a door prize? Yes	_____
No	_____
Exhibitor(s) Names	_____
Additional items requested:	<input type="checkbox"/> Color TV monitor—\$50.00 <input type="checkbox"/> Ethernet connection—\$30.00 <input type="checkbox"/> Flip chart with easel—\$20.00 <input type="checkbox"/> LCD video projector—\$200.00

Sponsorship Opportunities:

- Luncheon Sponsor—\$500 Vendor Reception Sponsor—\$300
- My company would like to be a partial sponsor—call me.

Benefits of sponsorship opportunities include:

- Recognition at sponsored event
- Recognition in all conference materials
- 2 additional attendee passes for your customers

Checks should be made payable to **CCOSH School**

Please mail your registration form and check to:

CCOSH School
c/o Tim McGlothlin
The Ergonomics Center
3701 Neil Street
Raleigh, NC 27607
Telephone: (919) 515-2052
Fax: (919) 515-8156
mcglothlin@TheErgonomicsCenter.com

CCOSH Exhibitor Refund Policy

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|-----------------------|---|
| 30 days prior notice: | Full refund, no attendee list |
| 15 days prior notice: | 50% refund, attendee list will be mailed |
| No show: | No refund. Attendee list will be mailed upon request. |